

**FEE TRANSMITTAL FOR FY 2002****TOTAL AMOUNT OF PAYMENT (\$)** \$130.00**Complete if Known:**Application No. 09/966,830Filing Date September 28, 2001First Named Inventor Bottom et al.Group Art Unit 2152Examiner Name Not Yet AssignedAttorney Docket No. 42390P12322**METHOD OF PAYMENT (check one)**

1. ☒ [X] The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666

Deposit Account Name _____

FIRST CLASS CERTIFICATE OF MAILING

(37 C.F.R. § 1.8 (a))

- ☒ [X] Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, DC 20231.

2. ☒ X Payment Enclosed:

☒ X Check
____ Money Order
____ Other

December 31, 2001
Date of Deposit

FEE CALCULATION**1. BASIC FILING FEE****Large Entity**

Fee Fee

Code (\$)

101 740

106 330

107 510

108 740

114 160

Small Entity

Fee Fee

Code (\$)

201 370

206 165

207 255

208 370

214 80

Fee Description

Utility application filing fee

Design application filing fee

Plant filing fee

Reissue filing fee

Provisional application filing fee

Fee Paid**SUBTOTAL (1) \$0.00****2. EXTRA CLAIM FEES****Extra Claims****Fee from below****Fee Paid**

Total Claims _____

- 20** = _____

X _____ = _____

Independent Claims _____

- 3** = _____

X _____ = _____

Multiple Dependent _____

_____ = _____

****Or number previously paid, if greater; For Reissues, see below.****Large Entity**

Fee Fee

Code (\$)

103 18

102 84

104 280

109 84

110 18

Small Entity

Fee Fee

Code (\$)

203 9

202 42

204 140

209 42

210 9

Fee Description

Claims in excess of 20

Independent claims in excess of 3

Multiple dependent claim, if not paid

**Reissue independent claims over original patent

**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$0.00

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	<u>\$130.00</u>
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	_____
139	130	139	130	Non-English specification	_____
147	2,520	147	2,520	For filing a request for ex-parte reexamination	_____
099	8,800	099	8,800	Request for inter partes reexamination	_____
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	_____
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	_____
115	110	215	55	Extension for response within first month	_____
116	400	216	200	Extension for response within second month	_____
117	920	217	460	Extension for response within third month	_____
118	1,440	218	720	Extension for response within fourth month	_____
128	1,960	228	980	Extension for response within fifth month	_____
119	320	219	160	Notice of Appeal	_____
120	320	220	160	Filing a brief in support of an appeal	_____
121	280	221	140	Request for oral hearing	_____
138	1,510	138	1,510	Petition to institute a public use proceeding	_____
140	110	240	55	Petition to revive unavoidably abandoned application or unavoidably delayed payment of issue fee	_____
141	1,280	241	640	Petition to revive unintentionally abandoned application or unintentionally delayed payment of issue fee	_____
142	1,280	242	640	Utility issue fee (or reissue)	_____
143	460	243	230	Design issue fee	_____
144	620	244	310	Plant issue fee	_____
122	130	122	130	Petitions to the Commissioner	_____
123	50	123	50	Petitions related to provisional applications	_____
126	180	126	180	Submission of Information Disclosure Stmt	_____
581	40	581	40	Recording each patent assignment per property (times number of properties)	_____
146	740	246	370	For filing a submission after final rejection (see 37 CFR 1.129(a))	_____
149	740	249	370	For each additional invention to be examined (see 37 CFR 1.129(b))	_____
179	740	279	370	Request for Continued Examination (RCE)	_____
169	900	169	900	Request for expedited examination of a design application	_____
Other fee (specify) _____					_____
Other fee (specify) _____					_____

SUBTOTAL (3) \$130.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:Typed or Printed Name: Michael DeSanctisSignature: Date: 12/13/14Reg. Number: 39,957Telephone Number: 303-740-1980